

GENERAL HEADQUARTERS
SUPREME COMMANDER FOR THE ALLIED POWERS
Public Health and Welfare Section

WEEKLY BULLETIN

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1949

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SECTION I

GENERAL

Enclosed with this Weekly Bulletin are the January and March issues of the World Health Organization's Mewsletter, furnished for the perusal of the Military Government Public Health Officers.

The Public Health and Welfare Section, by arrangement with WHO, will continue to receive Newsletter issues for subsequent distribution to Military Government PHO's. WHO is also mailing copies direct to the Ministry of Welfare and the Japan Medical Association in sufficient quantities to permit distribution to each prefectural health department and prefectural medical association.

SECTION II

PREVENTIVE MEDICINE DIVISION

Smallpox Control

Ten cases of smallpox have been reported from Osaka Prefecture, eight of them within Osaka City and all in the same neighborhood. The affected area has been placed under quarantine and vaccination is being done on a wide scale.

Prefectural and municipal officials expressed doubts with respect to their authority to enforce such a quarantine, perhaps in order to shift the burden of responsibility therefor to the Occupational Forces. The Infectious Disease Prevention Law is quite explicit on this subject and there are no amendments, revisions or enforcement regulations which in any way abridge the scope of the basic law. The attention of all Public Health Officers is invited particularly to Articles I, VIII and XIX of subject law, enumerating the "infectious diseases" and defining the authority of the Governor and other competent officials with respect to the control thereof.

Immunization Resumed: Typhoid-paratyphoid

Stocks of reassayed typhoid-paratyphoid vaccine have now become sufficient for a resumption of routine inoculations on a limited scale. The Ministry of Welfare through Yo-Hatsu No. 365 of 21 April 1949, subject, "Execution of Typhoid and Paratyphoid Preventive Inoculations in This Year," has directed prefectures to arrange a program for typhoid-paratyphoid inoculations from 1 May through June, to include initial immunization of children 36 to 48 months of age, and "booster" inoculations for all those required by law.

Initial immunizations for typhoid-paratyphoid will be given subcutaneously and, for children 36 months to 48 months of age, will consist of three inoculations of 0.25, 0.50 and 0.50 cc respectively at intervals of five to ten days. Some children over 48 months of age have not yet received the initial series of inoculations, therefore all children under school age who have not had the initial series of TAB inoculations should receive them at this time. "Booster" immunizations will be given intra-cutaneously only and will consist of a single inoculation of 0.1 cc typhoid-paratyphoid vaccine.

For carrying out the proposed program, special care will be required to instruct all physicians in the proper methods of intracutaneous inoculations. The use of cutaneous needles and well fitted small syringes will insure more accurate dosage and minimize waste incurred by changing needles for each separate inoculation. The instruction of physicians performing the inoculations, and the procurement of sufficient needles and syringes of the proper type will be primarily the responsibility of local health authorities. The Ministry of Welfare is planning a series of regional meetings with prefectural Health Department officials to give verbal directions in the proper methods of typhoid-paratyphoid immunization as applied to the present program.

The reference Yo-Hatsu, together with proposed distribution to prefectures is included with this Bulletin (Inclosure No. 1).

Tuberculosis Control

Reference Section II, Weekly Bulletin No. 120, for period 11 - 17 April 1949. Line one and two of item entitled "Tuberculosis Control-Case Supervision" which reads "An increase in the tuberculosis death rate from 161.6 per 10,000 per annum for the month of January 1948 to 163.9 for January 1949 has occurred in Japan," should read "An increase in the tuberculosis death rate from 161.6 per 100,000 per annum for the month of January 1948 to 163.9 for January 1949 has occurred in Japan.

Public Health Information

The producer of the motion picture, "Maternal and Child Handbook", reports that copies of this film have been sent to the following prefectures:

35 mm. Film

1. Information Section, Ministry of Welfare, Tokyo.
2. Public Health Board, Tokyo
3. Health Department, Osaka Prefectural Office
4. Children Section, Public Welfare Division, Hokkaido Provincial Office
5. Public Health Section, Wakayama Prefectural Office
6. Nutrition Section, Health Department, Chiba Prefectural Office
7. Maternal and Child Health Section, Kanagawa Prefectural Office
8. Public Health Department, Iwate Prefecture

16 mm. Film

1. Children Section, Fukui Prefectural Office
2. Public Health Section, Health Division, Nagano Prefectural Office
3. Public Health Section, Health Division, Hiroshima Prefectural Office
4. Public Health Section, Health Division, Gifu Prefectural Office
5. Public Health Department, Saitama Prefecture

SECTION III

VETERINARY AFFAIRS DIVISION

Animal Hygiene Section, Ministry of Agriculture and Forestry submitted the following report on outbreak of animal diseases for the period 23 - 29 April 1949.

<u>Prefecture</u>	<u>Diseases</u>	<u>Number of Cases</u>
Hyogo	Swine-cholera	14
Fukushima	" "	3
Tokyo	" "	4
Tokyo	Anthrax (cattle)	1
Aomori	Suspicious E.E.E.	1

SECTION IV

SUPPLY DIVISION

Biologic Reassay

During the period 18 - 25 April the following vaccines have been reassayed and found to meet minimum standards.

<u>Item</u>	<u>Manufacturer</u>	<u>Lot No.</u>	<u>Quantity</u> (Unit:cc)
Diphtheria Antitoxin	Aichi Pref. Lab.	15	9,660
Diphtheria Antitoxin	Toshiba Inst.	10	9,360

<u>Item</u>	<u>Manufacturer</u>	<u>Lot No.</u>	<u>Quantity</u>
Typhoid & Paratyphoid	Toshiba Inst.	144	19,700
		144	3,800
		151	26,600
		200	19,250
		200	14,650
Typhoid Vaccine	Kaketsu Lab.	19	140
		19	120
Typhus Vaccine	Takeda Yakuhin Co.	15	18,740
		17	19,740
		20	19,740
		22	19,740
		23	19,740

Production

The three month average production of medical supplies and pharmaceuticals reported for January - February - March exceeded 1948 monthly averages in yen value by 62 percent. Following are quantitative production averages for January - February - March as compared to 1948 monthly average production:

(1948 Monthly Averages - 1.00)

<u>Commodity</u>	<u>March</u>	<u>Jan. Feb. Mar.</u>
Laboratory Animals (each)	1.09	1.04
Biologics (cc)	No Production	No Production
Penicillin (O.U.)	3.46	3.45
Hexylresorcinol Crystals (kg)	4.90	2.55
Hexylresorcinol Capsules (piece)	5.80	2.39
Textile Sanitary Materials (lbs)	1.26	1.30
Rubber Sanitary Materials (kgs)	1.21	1.10
X-Ray & Electrotherapy Equipment (piece)	0.97	1.11
X-Ray Film (square meter)	1.22	1.09
X-Ray Tubes (each)	1.32	1.19
Rodenticides (kg)	1.64	1.35
DDT 100% (lb)	2.37	2.40
DDT Dust 10% (lb)	3.09	1.76
DDT Spray 5% (gal)	1.09	0.76
DDT Dusters & Sprayers (each)	0.69	0.71
Dental Instruments (piece)	0.82	0.94
Surgical Instruments (piece)	1.48	1.41
Glassware (piece)	1.11	1.00

Detailed production tables of the medical, dental, sanitary materials and equipment for February and March together with monthly averages for the current and previous years for comparison are attached (Inclosure No. 2).

SECTION V

NARCOTIC CONTROL DIVISION

Enforcement

Eleven foreign nationals and eight Japanese were arrested in a raid which resulted in the seizure of 140 grams of morphine hydrochloride. Some of the defendants exhibited serious withdrawal symptoms from having smoked the morphine.

In April a total of 21 foreign nationals were arrested for narcotic violations.

A hospital administrator and 11 other Japanese were arrested in Aichi Prefecture for illicit dealing in narcotics. Seven clinics and two pharmacies were involved in the investigation which revealed a black market broker was the source of supply for a total of 21 suspected persons.

In Chiba Prefecture a newspaper editor, a director of a hospital, and a fuel dealer were arrested as a result of illicit transactions involving 1,325 grams of morphine and 2,175 grams of cocaine. Some of the narcotics, stolen from a Japanese military installation at the end of the war, were obtained by foreign nationals and supplied to the illicit traffic in Tokyo and Yokohama. The arrests were made as a result of information obtained while investigating a narcotic theft.

A physician, a narcotic registrant, and his son, unemployed, were arrested in Kumamoto Prefecture for trafficking in narcotics which were obtained on forged narcotic order forms. Information leading to the arrests was furnished by a local wholesaler.

SECTION VI

WELFARE DIVISION

Public Assistance - National "Appeal" System

The Ministry of Welfare has released Kosei-Sho-Rei #17, dated 25 April 1949, which is an amendment to Kosei-Sho-Rei #38, of 1946, and which sets up the procedure for handling "complaints". The Ministry has also released Sha-Otsu-Hatsu #106, dated 25 April 1949, subject: "Amendment of Part of the Enforcement Regulations of the Daily Life Security Law", which amplifies and explains the amendment to the Ordinance. The Amendment to the Ordinance does not give an applicant the right to appeal, since the right to appeal will necessitate an amendment to the Daily Life Security Law. It does, however, set up a system whereby "complaints" will be received and by which the applicant or recipient can "appeal" over the heads of local welfare officials to the mayor, and if still dissatisfied, to the prefectural governor. Actually, the effect is the same as if the law were changed. It is expected that the Daily Life Security Law will be amended in this respect.

It will be noted that the plan also provides that when an application for assistance is rejected, the local official must notify the applicant in writing that the application has been rejected and the basis for rejection.

The Ordinance is effective 1 May 1949. Copies of the amendment to the Ordinance and the explanatory material are attached to this issue of the Weekly Bulletin, (Inclosure No. 3).

Helen Keller Fund

The Helen Keller Fund Campaign Committee reports a net figure of ¥35,873,993 collected from all sources in Japan.

The Committee has elected an Executive Committee of ten prominent Japanese to administer the expenditure of the Helen Keller Fund. Proposed programs for the blind and other physically handicapped groups will be submitted in the near future to the Executive Committee for consideration and final action by the Central Committee.

Consumer Livelihood Cooperatives

The following information has been received from the Ministry of Welfare on Consumer Livelihood Cooperatives:

<u>Number of Consumer Livelihood Cooperative Associations</u>	<u>Number of Members</u>	<u>Number of Members Families</u>	<u>Number of Directors</u>	<u>Amount Invested</u>
177	226,900	910,263	2,776	¥32,612,270

NOTE: Details by prefecture will be forthcoming.

Volunteer Services (Public Health and Hygiene):

Red Cross Volunteer Groups will not take over any of the responsibilities of the Public Health authorities and will only render voluntary assistance to the Health authorities in carrying out their responsibilities to their respective communities.

Programs of voluntary assistance will cover the following activities:

1. Assist the Health authorities by passing out accurate and up-to-date health and hygiene educational material to families and individuals. Encourage group discussions on hygiene subjects under the supervision of competent authorities.
2. Assist the Health authorities in their efforts to train citizens to respect public property, by encouraging them to keep all public buildings, streets and public facilities, and sewers clean.
3. Assist in the execution under the Health authorities supervision, campaigns to exterminate rats, fleas, lice, flies, mosquitoes and other disease carriers. To volunteer their service to the Health authorities in planned programs to disinfect public toilets, dumping grounds and other germ accumulating areas. The control of distribution and use of disinfectants, insecticides and rodenticides to remain exclusively with the Health authorities.
4. Volunteer their services to the Health authorities and medical institutions to assist them in clerical work, caring for the children while parents are being inoculated or temporarily hospitalized. Assist doctors and nurses in lay work.
5. Volunteer individual and group services in times of disaster, especially in assisting the authorities and Red Cross medical teams in caring for the injured.
6. House to house canvassing for the purpose of securing the public cooperation in support of mass x-ray or inoculation programs. Volunteers will assist authorities in registration work.

SECTION VII

SOCIAL SECURITY DIVISION

Health Insurance

On 28 April 1949 the Diet amended the Health Insurance Law. A summary of these amendments follows; a transcript of the amendments accompanies this Bulletin (Incl. No. 4).

1. A clarification in Article 2 of the term "standard remuneration".
2. A change in Article 3 in the number of classes and the range of standard monthly remuneration. These changes progressed from a 40 class, 300 yen to 8,100 yen range, to a 19 class, 2,000 yen to 24,000 yen range. Attendant to this change were deletions in Articles 49 and 50 on insured's minimum funeral allowance since the proposed minimum range on standard remuneration begins at 2,000 yen.
3. A new Article 6-2 to exclude registration taxes on Health Insurance Societies.
4. A change in Article 11 to increase penalty assessments for failure to pay contributions and provision for the removal of fractional amounts in the calculation of assessments.

5. A change in Article 11-2 to clarify collection procedures in the wards of large cities.

6. A new chapter on advisory councils and the attendant deletion of portions of Article 22, presently pertaining to such councils.

7. Provisions added in Articles 43-2, 43-6 and 44-2 for the assessment and payment of a partial charge for benefits to insured persons equivalent to the first consultation fee. Such amount is payable directly to the doctor by the insured patient and is deductible by the insurer from the doctor's statement. It does not apply to benefits to dependents.

8. Provision in Articles 43-3 and 43-4 for guidance from the Welfare Minister, predicated upon the recommendations of the Central Medical Care Advisory Council, on the appointment of and the service standards of doctors, dentists and pharmacists.

9. Provision in Article 50-2 for an increase in maternity allowance to an insured person from 100 yen to 200 yen per month.

10. A change in Article 59-3 increasing funeral allowance on the death of a dependent from 1,000 to 2,000 yen.

11. An increase in Article 59-4 in the amount allowed for childbirth expense from 500 to 1,000 yen.

12. Provision in Article 71-4 for an increase in overall contribution rates for government-managed Health Insurance from a range of 3.6% to 4.4% to within the limits of 4.5% to 5.5%.

13. Provision in Article 75-2 that the maximum rate for an insured person's contributions under society-managed Health Insurance be raised from 2.5% to 3.0% of such person's standard remuneration.

14. Provisions in Articles 84-3 and 84-4 for the appointment of secretaries and clerks for Health Insurance Appeals Boards.

15. Provisions in Articles 87, 88 and 88-2 for an increase in penalties for irregularities in compliance to the Law.

The proposed amendment concerning a change in contribution rate scale from 3.6% - 4.4% range to 4.5% - 5.5% range, in government-managed Health Insurance has a planned effective date of 1 April 1949. The remaining amendments have a planned effective date of 1 May 1949.

Social Insurance Division

Social Insurance Statistics

Benefits Paid Under Society-managed Health Insurance

Reference is made to PH&W Weekly Bulletin Numbers 95 (18-24 Oct 1948), 96 (25-31 Oct 1948), 103 (13-19 Dec 1948) and 120 (10-17 April 1949), for a summary of the Health Insurance Program as revised and monthly benefit statistics under the society-managed part of the program for the first five months of the past fiscal year (April through August 1948). Benefits paid under this branch of the program for the months of September through December 1948 are attached (Incl. No. 5).

These data reveal a similar development toward more and costlier benefits under society-managed Health Insurance as was noted for the government-managed branch of that program during the period under review. (See PH&W Weekly Bulletin No. 120) The reasons must be assumed to be the same.

Out of the total increase in coverage noted for the program as a whole, the society-managed part accounts for an increase by approximately 200,000 primary insured and 500,000 insured dependents during the months of August through

the proposed amendment concerning a change in contribution rate scale from 3.6% - 4.4% range to 4.5% - 5.5% range, in government-managed Health Insurance has a planned effective date of 1 April 1949. The remaining amendments have a planned effective date of 1 May 1949.

December 1948. The total numbers insured under society-managed Health Insurance in December was 2,619,287 primary insured and an estimated 6,000,000 dependents.

The number of Health Insurance Societies grew from 710 in July to 774 in December 1948 covering an unknown but large number of establishments, as societies are authorized only in the large-scale enterprises. Frequently these enterprises have branch establishments the personnel of which are all members of the one Health Insurance society bearing the name of the enterprise.

Crawford F. Sams

CRAWFORD F. SAMS
Brigadier General, Medical Corps
Chief

7 Inclosures:

- Incl. 1 - Execution of Typhoid and Paratyphoid Preventive Inoculation in This Year (YO-HATSU No. 365).
- Incl. 2 - Production of Medical, Dental, Sanitary Supplies and Equipment. (February - March 1949).
- Incl. 3 - Ministry of Welfare Ordinance No. 17 (Kosei-Sho-Rei No. 17).
- Incl. 4 - Amendments to the Health Insurance Law.
- Incl. 5 - Social Insurance Statistics - Benefits Granted Under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948-49.
- Incl. 6 - Monthly Summary of Vital Statistics in Japan - February 1949.
- Incl. 7 - Report of Cases and Deaths of Communicable and Venereal Diseases for the Week Ended 23 April 1949.

April 21, 1949

TO: Governor, Each Prefecture

FROM: Director, Disease Prevention Bureau, Welfare Ministry

SUBJECT: Execution of Typhoid and Paratyphoid Preventive Inoculation in This Year

On execution of typhoid and paratyphoid preventive inoculation in this year, under several extraordinary circumstances, method of intracutaneous injection will be used extensively, accordingly you will arrange the program as early as possible and are expected to exert possible effort in putting this plan into operation as follows:

1. Time of Execution

From 1 May to the end of June.

2. Method and Amount of Injection.

a. Initial Immunization.

Subcutaneous injection will be used in accordance with "Rules for the Execution of Anti-Typhoid Inoculations".

It is emphasized that completion of initial inoculation for infants aged from 36 months to 48 months after birth is the most important.

b. Booster Shots.

Intracutaneous injection of 0.1 cc will be used.

Technique of intracutaneous injection will be instructed thoroughly for physicians who will be vaccinators and supervision will be made in order to have no mistechnique of execution.

3. Distribution of the Vaccine.

Vaccine amount necessary for this program has been estimated by this Bureau as shown on the separate paper in addition to the vaccine already distributed previously for emergency use.

According to this program, the vaccine will be distributed immediately by Pharmaceutical Bureau after information of approval or re-assay and shipping for all prefectures will be accomplished by the end of June at latest.

If the amount of allotment is not adequate, it will be reported immediately with reason for it.

DISTRIBUTION OF ANTI-TAB VACCINE
TO EACH PREFECTURE

Prefecture	Total Amount to be Issued (1)	Amount Issued Already (1)	Amount to be Issued Additionally (1)
Hokkaido	507	63	444
Aomori	153	18	135
Iwate	163	30	133
Miyagi	200	81	119
Akita	161	16	145
Yamagata	167	16	151
Fukushima	255	100	155
Ibaraki	257	26	231
Tochigi	195	18	177
Gumma	201	19	182
Saitama	267	50	217
Chiba	269	40	229
Tokyo	680	440	240
Kanagawa	291	52	239
Niigata	307	47	260
Toyama	125	13	112
Ishikawa	119	11	108
Fukui	92	16	76
Yamanashi	103	6	97
Nagano	260	29	231
Gifu	191	44	147
Shizuoka	301	78	223
Aichi	405	322	83
Mie	183	48	135
Shiga	109	7	102
Kyoto	224	46	178
Osaka	440	71	369
Hyogo	387	41	346
Nara	97	18	79
Wakayama	85	13	72
Tottori	75	18	57
Shimane	113	21	92
Okayama	208	21	187
Hiroshima	257	84	173
Yamaguchi	189	28	161
Tokushima	109	18	91
Kagawa	117	7	110
Ehime	187	29	158
Kochi	109	12	97
Fukuoka	416	73	343
Saga	117	16	101
Nagasaki	197	19	178
Kumamoto	224	26	198
Oita	156	11	145
Miyazaki	132	9	123
Kagoshima	221	17	204
TOTAL	10,021	2,188	7,833

PRODUCTION OF MEDICAL, DENTAL, SANITARY SUPPLIES AND EQUIPMENT
(February - March 1949)

Value (Millions of Yen)

Value (Millions of Yen)		Monthly Averages					
		March	Feb.	1949	1948	1947	1946
Pharmaceuticals: Totals:		2,731.0	2,084.0	2,400.0	1,473.0	406.0	121.7
Controlled Medicines		266.0	203.0	223.0	300.0	123.0	1.7
Non-controlled medicines		1,804.0	1,433.0	1,595.0	877.0	145.0	59.0
Home Remedies		661.0	448.0	582.0	336.0	138.0	61.0
Biologics		.5	.7	2.8	19.7	22.0	7.7
Textile Sanitary Materials		201.0	179.0	198.0	107.0	5.9	2.3
Rubber Medical Goods		53.0	52.0	48.0	21.0	6.8	-
Surgical Instruments		35.0	32.0	31.0	26.0	10.0	9.5
Dental: Total:		39.0	38.0	40.0	25.0	13.1	3.8
Dental Materials(exclusive of precious metals)		21.0	16.0	18.0	10.0	4.2	1.1
Dental Instruments		18.0	22.0	22.0	15.0	8.9	2.7
Grand Total		3,059.5	2,385.7	2,719.8	1,671.7	463.8	145.0
Quantitative Unit							
Selected Pharmaceuticals:							
Marbarsen	Kg	67.7	144.7	90.9	148.9	-	-
Bi Subsal Inj.	Liter	4.1	59.7	174.2	444.7	-	-
Sulfathiazole	Kg	10,978.0	7,531.0	8,419.0	6,017.0	-	-
Penicillin O.U/1,000,000		85,633.0	55,386.0	59,677.0	24,752.0	1,180.0	-
Hexylresorcinol							
Crystal	Kg	1,475.3	698.9	879.0	301.1	-	-
Capsule	Piece/1000	2,903.0	140.3	1,196.3	499.3	-	-
Sulfadiazine	Kg	60.0	37.0	38.0	10.7	-	-
Biologics							
Cholera vaccine	cc/1000	-	-	-	69.9	141,000.0	-
Diphtheria antitoxin	cc/1000	-	-	-	92.1	61.1	-
Diphtheria Toxoid	cc/1000	-	-	-	1,998.7	637.5	-
Smallpox	Dose/1000	-	-	-	1,148.5	3,750.0	-
Typhoid	cc/1000	-	-	-	2,984.7	11,100.0	-
Typhus	cc/1000	-	-	-	100.3	545.0	-
Laboratory Animals (supplied to Labs)							
Guinea pigs	Each	54,978.0	51,536.0	52,510.0	50,178.0	32,645.0	-
Rats	Each	2,775.0	3,677.0	3,334.0	3,280.0	3,250.0	-
Rabbits	Each	1,093.0	1,207.0	1,211.0	1,032.0	1,136.0	-
White Mice	Each	1,314.0	1,356.0	1,369.0	1,679.9	1,240.0	-
		49,796.0	45,296.0	46,596.0	44,187.0	27,009.0	-
Textile San. Materials Total		664.8	556.8	687.7	526.1	312.0	113.0
Absorbent Cotton	Lb/1000	497.7	358.6	486.9	321.0	214.3	29.1
Gauze	Lb/1000	123.0	115.4	110.6	105.1	57.5	37.8
Bandage	Lb/1000	44.1	82.8	90.2	100.0	40.2	46.1
Rubber Medical Goods		84,242.0	80,307.0	76,696.0	69,871.0	49,999.0	-
Surg. Instr.	Piece/1000	3,145.0	3,020.0	2,998.0	2,121.0	1,392.0	-
Dental Instr.	Piece/1000	392.0	444.0	447.0	477.0	326.0	-
Glass Syringes	Piece/1000	425.0	349.0	381.0	382.0	399.0	-
Insect & Rodent Control Supplies							
DDT:							
DDT 100%	Lb/1000	128.3	135.9	129.7	53.6	24.4	-
DDT 10% dust	Lb/1000	986.3	243.5	560.9	318.7	506.2	240.7
DDT 5% spray	Gal/1000	199.1	151.7	137.0	180.5	83.4	-
Pyrethrum Emulsion	3 oz.	109.6	-	36.5	386.1	681.1	612.7

Rodenticides			Monthly Averages				
Antu	Kg/1000		March	Feb	1946	1947	1948
Nekoirazu, Messo, Yoku Byo			23.0	16.4	19.0	14.0	9.2
Equipment	DDT	Total	14,526.0	14,707.0	15,091.0	21,054.0	15,973.0
DDT Duster	Each		6,200.0	6,100.0	6,050.0	6,764.0	7,500.0
Engine Duster	Each		1.0	5.0	7.0	10.0	-
Sprayer Knapsack type							
	Each		1,275.0	1,870.0	2,125.0	7,254.0	3,287.0
Sprayer pump type	Each		3,250.0	3,932.0	3,776.0	3,595.0	1,977.0
Sprayer hand type	Each		3,800.0	2,800.0	3,133.0	3,431.0	3,209.0
X-Ray Film	Sqm/1000		36.3	37.5	32.6	29.7	24.7
2 1/2 x 3 1/2	Doz		-	-	-	987.0	-
4-3/4 x 6 1/2	Doz		-	564.0	188.0	1,048.0	-
5 x 7	Doz		632.0	406.0	485.0	892.0	-
6 1/2 x 8 1/2	Doz		1,813.0	1,645.0	1,729.0	2,016.0	-
8 x 10	Doz		2,082.0	2,308.0	2,007.0	3,696.0	-
10 x 12	Doz		30,890.0	33,718.0	28,722.0	22,698.0	-
11 x 14	Doz		2,642.0	2,018.0	1,887.0	1,176.0	-
14 x 17	Doz		-	-	-	1,209.0	-
Dental	Doz		250.0	1,460.0	645.0	734.0	-
120	Roll		2,364.0	3,500.0	6,114.0	4,144.0	-
35mm	Roll		16,360.0	6,302.0	8,977.0	-	-
X-Ray Tube	Total		1,317.0	1,213.0	1,193.0	996.0	-
Coolidge Type	Each		953.0	814.0	832.0	771.0	-
Kenotron Type	Each		364.0	399.0	361.0	225.0	-
X-Ray & Electrotherapy							
Equipment	Total		899.0	1,221.0	1,026.0	923.0	501.0
X-Ray machines	Each		380.0	362.0	373.0	312.0	175.0
Ultra short wave	Each		50.0	56.0	43.0	89.0	48.0
Ultra violet ray	Each		40.0	71.0	49.0	92.0	35.0
Infra-red ray	Each		-	66.0	23.0	14.0	29.0
Luminous screens	Each		40.0	210.0	137.0	140.0	56.0
Intensifying screens							
	Each		379.0	448.0	392.0	266.0	146.0
Electro surgical							
Instruments	Each		10.0	8.0	9.0	10.0	12.0

MINISTRY OF WELFARE

Ministry of Welfare Ordinance No. 17

Date: 25 April 1949

Kosei-sho-Rei No. 17

A part of the Enforcement Regulations of the Daily Life Security Law (Ministry of Welfare Ordinance No. 38, 1946) shall be amended as follows:

Joji Hayashi
Minister of Welfare

The following articles shall be added to Article 8:

Article-8-(2) In case the application in accordance with Paragraph 1 of the preceding article is made, the mayor of a city, town or village shall accept it immediately and take necessary measures within 14 days, provided, however, that this term limit may, under special circumstances, be extended up to 30 days.

If, in accordance with the preceding paragraph, the mayor of city, town or village deems the protection to be unnecessary, he shall notify the applicant of it in writing, specifying the reasons.

Article 8-(3) If a complaint has been filed by a person receiving protection respecting the extent and method of protection or the discontinuance, suspension or alternation of protection, or if an objection has been raised against the measures taken under Paragraph 2 of the preceding article 8-(2), the mayor of a city, town or village shall take necessary measures within 14 days. The provisions of Paragraph 2, the provision and Paragraph 2 of the preceding Article 8-(2), shall be applied mutatis mutandis to this case.

Before taking the measures of the preceding paragraph, the mayor of a city, town or village may ask the opinion of the welfare commissioner council as prescribed in the Welfare Commissioner Law (Law No. 108, 1949).

Article 8-(4) In case a complaint has been filed by the applicant against the measures taken by the mayor of a city, town or village in accordance with the preceding paragraph, the prefectural governor shall accept it immediately, and decide whether or not the modification of the measures taken is necessary and notify, if he deems it necessary, the mayor of a city, town or village to that effect as soon as possible. In this case the prefectural governor shall, as soon as possible, notify the applicant of the contents of the instruction through the mayor of a city, town or village.

When the mayor of a city, town or village has received the instruction of the preceding paragraph, he shall take an action within 7 days, and report immediately to the prefectural governor on the result thereof.

The prefectural governor shall make a report to the Minister of Welfare within 14 days after he has received the report of the preceding paragraph.

*If the prefectural governor deems it unnecessary to modify the measures taken by the mayor of a city, town or village, he shall immediately notify the applicant of it, simultaneously through the mayor of a city, town or village, filing a report to the Minister of Welfare.

This ministerial ordinance shall come into force as from May 1, 1949.

SOCIAL AFFAIRS BUREAU
MINISTRY OF WELFARE

Sha-Otsu-Hatsu No. 106

21 April 1949

TO : The Prefectural Governors

FROM : Director, Social Affairs Bureau, Ministry of Welfare.

SUBJECT: Amendment of part of the Enforcement Regulations of the Daily Life Security Law.

A part of the Enforcement Regulations of the Daily Life Security Law has been amended as shown in the separate paper, and shall be promulgated and put into force as from May 1, 1949. Therefore, you are requested, being well aware of the following matters, to do your utmost in familiarizing the agencies concerned with its enforcement:

I. Purport of the amendment and the basic principle of its application.

1. Two years and a half have already elapsed since the legislation of the Daily Life Security Law, which application is by degree manifesting a marked effect with the concerted cooperation of all concerned, but the actual situation at present is that the prevention of undiscovered or overlooked cases or the cases which have been rejected for improper reason, would be still far from successful it hinges upon only the efforts and sincerity of the concerned without any reliable guarantee. When we think as it is expected, under the straitened circumstances coupled with the austere enforcement of the Nine Point Economic Stabilization program, the mission to be assumed by the Daily Life Security Law will inevitably become more and more significant, the modification of its aforementioned weakpoint at the earliest opportunity has become a recognized necessity. Accordingly, the provisions have been laid down in the Enforcement Regulations of the Law regarding the complaints by which an applicant for public assistance can lodge a claim for fair handling of this Law.

2. In a word, the amendment of the Enforcement Regulations aims to materialize fair application of the Daily Life Security Law. It goes without saying that the head men of a city, town or village, the prefectural governors exercising supervision over them, and the Minister of Welfare ultimately responsible for the enforcement of the Law, all of them are putting forth their utmost endeavours as to a fair appropriate application of the Law. Furthermore, an attempt has been made to ensure a fairer and more appropriate handling of the Law by means of affording an opportunity to make the people set forth their views freely. In consequence, the interests of the needy will be safeguarded more substantially than ever, but legally a complaint is nothing but a chance to encourage those responsible for the enforcement of the Law to perform a fair application of the Law. In other words, it does not mean that a complaint gives the needy the right of making a positive demand for protection. For this reason, the interpretation put in Sha-Hatsu No. 55, "Concerning questions on the Daily Life Security Law" dated March last of this year, will undergo no modification.

3. Inasmuch as complaint differs from an appeal in nature, as it is explained above, you should not be too particular about the formalities attended to. In handling a complaint, you should, at this opportunity, not only review the contents of the complaint, but also the whole aspect of that case with such an attitude as to pick up positively other items in addition to those stated in the complaint.

II. Essential points of the handling.

1. The notification mentioned in Article 8-(2), paragraph 2 to the Enforcement Regulations, which is to be drawn up according to "Notification on a Rejected Application for Protection" illustrated in Form example 1, shall be sent directly to the needy person or the applicant, furnishing a detailed and concrete explanation to his satisfaction as to the circumstances which led to the rejection of his application.

In this case any other relief means conceivable shall be attempted. Similarly such a consideration shall be given to the cases of rejecting a complaint in Article 8-(2) and the following articles.

2. The conditions of the measures taken as to the rejection of an application for protection shall in detail, be recorded in "Investigation on Rejecting an application for Protection under the Daily Life Security Law", and preserved together with a copy of the above Notification on a Rejected Application for Protection.

3. The items statable in a complaint shall be those pertaining to the determination of the kind, extent and method of protection performed by the headman of a city, town or village, or the prefectural governor in accordance with this law. Accordingly, all of those prescribed in the provisions of Articles of the 4th Chapter of the Law shall be included in the forementioned items.

4. The principle is that the scope of a complaint is limited to the modification of the extent of protection, the cancellation of the discontinuance or suspension of protection and other items concerning the contents of protection disposable within the duty and authority of the headman of a city, town or village as the organ for protection, but you should, as a matter of course, accept such a complaint as having a reason for which the needy can not maintain his minimum living simply because the headman of a city, town or village is negligent in taking the procedures to the higher office with respect to the items outside their rights.

Needless to say, you should not accept a complaint merely intending for hostile criticism and personal abuse.

5. The eligibility of an appellant shall be the same as that of a person applying for protection, which is prescribed in Article 1, Paragraph of the Enforcement Regulations.

6. A complaint shall be lodged against the headman of a city, town or village or the supervising prefectural governor stipulated in Article 4 of the Law. However, in case when an appellant has filed at the wrong receiving organ by mistake or out of ignorance, such appropriate step as to point out the right receiving organ without rejecting the complaint automatically or to refer that case to the competent headman of a city, town or village shall be taken.

7. The term for making a complaint is not particularly limited, but a complaint shall be filed as quickly as possible after an applicant has received a notice of decision on protection. For this purpose, it shall be specified in all of the notices of decision on protection to the effect that an applicant is qualified to lodge a complaint, and in doing so, he should do so with promptness.

In case when in the course of a long time since the decision on protection was enforced, an increase in income, and the various circumstances or basic conditions, such as the revision of the standard which were taken into account at the time of deciding protection have been changed, a complaint shall not be accepted as such, but handled as a new application filed for protection.

8. The term mentioned in Article 8-(2) and the following articles shall be reckoned, regarding the day lastly accepted by the competent headman of a city, town or village as the opening day, and the day having completed the measures required as the closing day (in case of a complaint in writing, the date by post). Therefore, such a method of filing a complaint, as exemplified in the presentation of a complaint through the welfare commissioner, which will be liable to raise questions, shall, if possible, be avoided.

9. The judgement on a complaint lodged with the prefectural governor in accordance with the provisions of Article 8-(4) of the Enforcement Regulations shall not be committed to the chief of the Prefectural Local District Office.

10. The principle is that a complaint should be made in writing according to Form example 1, indicated in the separate paper. Its acceptance, shall, however, be refused on the ground that the form of a complaint is not adequate.

On oral complaint shall, under the circumstances of an appellant, be accepted. In this case the formal complaint shall be drawn up in hearing the statement by the appellant, subsequently asking his seal.

11. The judgement by the headman of a city, town or village or the prefectural governor upon the complaint filed shall be notified to the appellant with "Judgement on Complaint" illustrated Form Example 2 of the separate paper.

Even in case when necessary measures have quickly been taken before delivering "Judgement on Complaint", it shall later be delivered to the appellant.

12. A complaint and the measures taken on its judgement shall be recorded in detail in "Investigation Report on Handling the Complaint Judgement". A complaint, Judgement on Complaint, and Investigation Report on Handling the Complaint Judgement shall be put together and preserved as a Complaint Handling Book.

For the appellant having his case, card, the date of filing a complaint, and the main points of the complaint and the conditions of its handling shall be entered in his case card.

13. The report to the Minister of Welfare prescribed in Article 8-(4), paragraph 3 and 4 of the Enforcement Regulations shall be made with a copy of the documents listed below.

Furthermore, the explanation on the handling of the complaint case performed by the headman of a city, town or village and the concerned shall be given in detail.

a. Protection case card.

b. A complaint against the headman of a city, town or village, his Judgement on Complaint, and Investigation Report on Complaint Judgement.

c. A complaint against the prefectural governor, his Judgement on Complaint and Investigation Report on Complaint Judgement.

d. The city, town or village headman's report provided in Article 8-(4), Paragraph 2, of the Enforcement Regulations.

e. Table for Determining the Income, Table for Determining the Minimum Living Cost upon which the Judgement by the headman of a city, town or village is based.

f. Other referential documents.

14. Inasmuch as a complaint may occasionally involve personal affairs of confidential nature, special attentions shall be paid not to confide an appellant's name and the contents of a complaint to any other persons than the concerned.

15. The number of complaints filed to the headman of a city, town or village and that of the judgements shall be reported quarterly to this Ministry by the 15th of the following month of each quarter period according to Form example 4 illustrated in the separate paper.

III. Others

1. All cities, towns or villages shall take actions to familiarize the purport of this complaint system, so that a request for protection or a complaint may be handled with fairness, and make arrangements to prepare the papers for an application or a complaint by which an applicant or appellant makes entries of necessary items easily.

A part of the Health Insurance Law (Law. No. 70 of 1922) shall be amended as follows:

The proviso in Article 2, paragraph 1, shall be amended as follows:
 "provided, however, that this definition shall not include such earnings as may be received at extra-ordinary intervals or less regularly than every three months".

In Article 3, paragraph 1, shall be repealed and the provision of paragraph 2, shall be amended as follows:

"The amount of standard remuneration of an insured person shall be determined on the basis of the monthly amount of the insured person's remuneration in accordance with the classes prescribed in the following table:

Classification of Standard Remuneration	Standard Monthly	Remuneration Daily	Monthly Value of Remuneration
1st class	¥ 2,000	¥ 70	Less than ¥ 2,250
2nd class	" 2,500	" 85	¥ 2,250 or over, but less than ¥ 2,750
3rd class	" 3,000	" 100	" 2,750 " " " 3,250
4th class	" 3,500	" 115	" 3,250 " " " 3,750
5th class	" 4,000	" 130	" 3,750 " " " 4,250
6th class	" 4,500	" 150	" 4,250 " " " 4,750
7th class	" 5,000	" 170	" 4,750 " " " 5,500
8th class	" 6,000	" 200	" 5,500 " " " 6,500
9th class	" 7,000	" 230	" 6,500 " " " 7,500
10th class	" 8,000	" 270	" 7,500 " " " 8,500
11th class	" 9,000	" 300	" 8,500 " " " 9,500
12th class	" 10,000	" 330	" 9,500 " " " 11,000
13th class	" 12,000	" 400	" 11,000 " " " 13,000
14th class	" 14,000	" 470	" 13,000 " " " 15,000
15th class	" 16,000	" 530	" 15,000 " " " 17,000
16th class	" 18,000	" 600	" 17,000 " " " 19,000
17th class	" 20,000	" 670	" 19,000 " " " 21,000
18th class	" 22,000	" 730	" 21,000 " " " 23,000
19th class	" 24,000	" 800	" 23,000

Article 6-2 shall be added immediately after Article 6 as follows:

"Article 6-2. No registration tax shall be imposed on the registration of the acquisition of right or the preservation of ownership of a building or land used exclusively by a Health Insurance Society as an office or facility as prescribed in Article 23".

In the principal part of the sentence of Article 11, paragraph 3, "5 sen" shall read "20 Sen".

In the same paragraph, item 1, "100 Yen" shall read "1,000 Yen".

In the same Article, a new paragraph 4 shall be added as follows:

"If there is a fraction of less than 1,000 Yen in the amount of contributions charged, delinquency fees shall be calculated disregarding such fractions".

In the same Article, former paragraph 4 shall be changed to paragraph 5 with the following:

"1 Yen" shall read "10 Yen", "preceding paragraph" shall read "preceding two paragraphs" and the following sentence shall be added:

"If there is a fraction of less than 10 Yen in the amount of delinquency fee, such fraction shall not be collected."

In Article 11-2, paragraph 1, "the city, town, or village where the defaulters live" shall be amended as "the city, town, or village (as used throughout this Law includes "ward" in such areas of Tokyo Metropolis where wards exist and in such cities as were designated according to the provisions of Article 155, paragraph 2, of the Local Autonomy Law) where defaulters live."

In the same Article, paragraph 4 shall be deleted.

In Article 22, paragraphs 2 through 4 shall be deleted.

In Article 42-2, paragraph 5, "Article 23" shall read "Article 6, 6-2, 23".

In Article 43-2, the following paragraph shall be added:

"An insured person, who receives benefits according to the provisions of the preceding paragraph, shall be subject to pay as a partial charge an amount equal to the first consultation fee which will be calculated upon the basis determined by the Welfare Minister according to the provisions of Article 43-6, paragraph 2; provided, however, that a Health Insurance Society may prescribe in the Articles of the Society other methods of paying a partial charge for those who receive benefits from a person appointed by the society within the limitation of the amount of the above mentioned partial charge".

In Article 43-3, paragraph 1, "in accordance with the procedures prescribed by the Ministerial Ordinances" shall be added immediately after "Insurance doctors and pharmacists shall be appointed".

In Article 43-4, paragraph 1, "and shall observe the directions prescribed by the Welfare Minister," shall be added immediately after "insurance doctors and pharmacists shall exercise kindness or care".

In the same Article, a new paragraph shall be added as follows:

"The Welfare Minister in determining the directions prescribed in the preceding paragraph, shall consider the views of the Central Social Insurance Medical Care Advisory Council".

In the same Article, former paragraph 2 shall be changed to paragraph 3.

In Article 43-6, paragraph 1, "less the amount of the partial charge" shall be added immediately after "the amount prescribed for such medical care".

In Article 44-2, paragraph 1, "less the amount of the partial charge" shall be added immediately after "the amount prescribed for medical care".

The proviso in Article 49, paragraph 1, shall be deleted.

The proviso in Article 50, paragraph 1, shall be deleted.

In Article 50-2, paragraph 1, "100 Yen" shall read "200 Yen", and paragraph 2 of the same article shall be deleted.

In Article 59-2, paragraph 5, "Article 43-2" shall read "Article 43-2, paragraph 1".

In Article 59-3, "1,000 Yen" shall read "2,000 Yen".

In Article 59-4, paragraph 1, "500 Yen" shall read "1,000 Yen"; in paragraph of the same article, "Article 50-2, paragraph 1", shall read "Article 50-2 and Article 55".

In Article 62, paragraph 3, "Article 46 and Article 51, paragraph 2" shall read "Article 46 and Article 51, paragraphs 2 and 3".

In Article 69-2, "Article 62, paragraphs 1 and 2", shall read "Article 61 and 62, paragraphs 1 and 2, and Article 63".

In Article 71-4, paragraph 1, "4 percent" shall read "5 percent"; in paragraph 2 of the same Article, "3.6 percent to 4.4 percent" shall read "4.5 percent to 5.5 percent"; and "Health Insurance Committee" shall read "Health Insurance Advisory Council".

In Article 75-2, "2.5 percent" shall read "3 percent".

"Chapter VII" shall be amended as "Chapter VIII" and Chapter VI" as "Chapter VII" and next to Article 79-2 the following chapter shall be added:

CHAPTER VI

Health Insurance Advisory Council

"Article 79-3. The Health Insurance Advisory Council (hereinafter referred to as the "Council") shall be established in the Ministry of Welfare and shall study and advise relative to the administration and operation of Government-managed Health Insurance.

"Article 79-4. The Council shall investigate, deliberate and make written recommendations relative to the administration and operation of Government-managed Health Insurance as requested by Welfare Minister, and shall have the right to make such written recommendations on its own initiative to the Welfare Minister and other Ministers concerned.

"The Welfare Minister shall request the opinion of the Council before acting upon matters involving planning, legislation, or major administrative policy concerning Government-managed Health Insurance.

"Article 79-5. The Council shall consist of six members representing the insured, six members representing the employers and six members representing the public interest, including representatives of the medical profession.

"Each member shall be appointed by the Welfare Minister.

Article 79-6. The members' term of office shall be two years, and one-half of the members shall be appointed annually.

"A term of office for a member appointed to fill a vacancy shall be for the remainder of the term of his predecessor.

"Article 79-7. There shall be a chairman of the Council elected by the members from among those members who represent the public interest.

"The chairman shall preside over the meetings and shall represent the Council.

"In case of the chairman's absence, an acting chairman who is elected in the manner prescribed in paragraph 1, shall substitute for the office.

"Article 79-8. The Welfare Minister shall produce such data and information concerning Health Insurance as the Council may request.

"Article 79-9. The Council shall convene as often as necessary, and at least once every three months unless good cause is shown.

"Article 79-10. The Council shall convene at the direction of the chairman.

"When requested by the Welfare Minister or by one-third or more of the members, the Council shall be convened within two weeks of such request.

"Article 79-11. Within sixty days after the close of each fiscal year, the Council shall submit a written report to the Welfare Minister concerning its activities and findings and a summary of its recommendations during the fiscal year concerned.

"Article 79-12. There shall be secretaries, not exceeding eight, for the Council and such secretaries shall be appointed by the Welfare Minister from the staff of the Ministry of Welfare and men of learning and experience.

"The secretaries shall be at the service of the members of the Council whenever requested by such members for the purpose of rendering technical advice and administrative aid.

"Article 79-13. There shall be clerks, not exceeding five, for the Council and such clerks shall be appointed by the Welfare Minister from the staff of the Ministry of Welfare.

"The clerks shall perform clerical duties under the supervision of their superiors",

Next to Article 84-2, the following two articles shall be added:

"Article 84-3, There shall be secretaries, not exceeding six, for the Health Insurance Appeals Board and such secretaries shall be appointed by the Welfare Minister from the staff of the Ministry of Welfare.

"The secretaries shall be at the service of the members of the Health Insurance Appeals Board whenever requested by such members for the purpose of rendering technical advice and administrative aid.

"Article 84-4. There shall be clerks, not exceeding five, for the Health Insurance Appeals Board and such clerks shall be appointed by the Welfare Minister from the staff of the Ministry of Welfare.

"The clerks shall perform clerical duties under the supervision of their superiors."

In Article 87, paragraph 1, "6 months" shall read "1 year", and "5,000 Yen" shall read "30,000 Yen"; and paragraph 3 and 4 of the same article shall be deleted.

Article 88 shall be amended as follows:

"Article 88. If an employer who employs the insured comes within any of the following items without good reason, he shall be subject to imprisonment for a period of not more than 6 months or a fine of not more than 30,000 Yen:

1. In case of refusal to make reports, making false reports, refusing to present documents, or refusing to attend a hearing, as prescribed in this Law;
2. In case of refusal to answer or making false statement in reply to the inquiries of a competent government or local official, or refusing, hindering, or evading an inspection by such official, as prescribed in this Law;
3. In case of failing to pay, by the time designated in the demand letter, the contributions prescribed in the principal part of Article 77".

Article 88-2 shall be amended as follows:

"Article 88-2. If a person to be granted insurance benefits or any other person concerned, except a person described in the preceding Article, comes within any of the following items without good reason, he shall be subject to imprisonment for a period of not more than 6 months or a fine of not more than 10,000 yen:

1. In case of refusal to make reports, statements, or applications, making false reports, statements, or applications, refusing to present documents, refusing to attend a hearing, or refusing to undergo medical examination by licensed doctors, as prescribed in this Law;
2. In case of refusal to answer or making false statements in reply to the inquiries of a competent government or local official, or refusing, hindering, or evading an inspection by such official, as prescribed in this Law."

Article 88-3 shall be deleted.

In Article 91, "Article 87, paragraph 3 or 4" shall be deleted.

Supplementary Provisions

1. This Law shall come into force from May 1, 1949. However, amended provision of Article 71-4, paragraph 1, shall come into force from April 1, 1949.

2. As to the person who is qualified as an insured before the date of enforcement of this Law and so continues, his or her standard remuneration shall be computed as though such person obtained his or her qualification on the date of enforcement.

3. A delinquency fee on a contribution demanded by a pressing letter before the date of enforcement of this Law shall be regulated by former examples.

4. Any person who is a member, secretary or clerk of the Health Insurance Committee at the time of the enforcement of this Law, shall be considered to be appointed as a member, secretary or clerk, respectively, of the Health Insurance Advisory Council.

5. The tenure of such members of the Council shall be computed as of the dates on which they were appointed or commissioned as members of the Health Insurance Committee.

SOCIAL INSURANCE STATISTICS

Benefits Granted Under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948 - 49, by Month */

SEPTEMBER 1948 a/

	Cases b/		Days c/	Per Case	Amount		Per Case c/
	Total				Total		
A. To Primary Insured							
1. Medical care benefits	477,810	d/)	3,100,219	6.5	126,882,000		266
2. Nursing care benefits		f/) p/					
3. Dental care benefits	58,410	e/)	334,346	5.7	21,578,000		369
4. Medical care expenses	15,838	g/) p/	349,632	22.1	18,560,000		1,172
5. Dental care expenses		h/)					
6. Sickness and injury allowance	39,068	i/	762,253	19.5	53,696,000		1,375
7. Maternity allowance	1,010	j/	30,348	30.0	1,444,000		1,430
8. Delivery expenses	947	k/		-	966,000		1,020
9. Nursing allowance	274	l/		-	111,000		405
10. Funeral expenses	1,707	m/		-	4,319,000		2,530
11. Other benefits	61,705	n/		-	14,677,610		238

B. To Dependents of Insured

1. Medical care benefits	239,342	d/)	2,016,397	7.0	36,298,000		125
2. Medical care expenses		e/) p/					
3. Dental care benefits	28,252	f/)	139,146	4.9	3,322,000		118
4. Dental care expenses		g/) p/					
5. Delivery expenses	18,997	k/		-	7,763,000		409
6. Nursing allowance	11,661	l/		-	2,987,000		256
7. Funeral expenses	3,328	m/		-	2,907,000		873

See footnotes at end of table.

SOCIAL INSURANCE STATISTICS
Benefits Granted Under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948-49, by Month */

OCTOBER 1948 a/

	<u>Cases</u> <u>b/</u>		<u>Days</u> <u>c/</u>		<u>Amount</u>	
	Total	Per Case	Total	Per Case		

A. To Primary Insured						
1. Medical care benefits	502,536		3,430,382	6.8	165,534,000	329
2. Nursing care benefits						
3. Dental care benefits	62,814		365,600	5.8	32,346,000	515
4. Medical care expenses	18,861		412,779	21.9	25,205,000	1,340
5. Dental care expenses						
6. Sickness and injury allowance	39,713		930,056	23.4	51,719,000	1,300
7. Maternity allowance	1,104		41,270	37.3	1,865,000	1,690
8. Delivery expenses	963		-	-	1,318,000	1,351
9. Nursing allowance	457		-	-	337,000	740
10. Funeral expenses	1,512		-	-	4,853,000	3,210
11. Other benefits	62,216		-	-	25,975,753	418

B. To Dependents of Insured						
1. Medical care benefits	321,172		2,330,182	7.3	53,812,000	168
2. Medical care expenses						
3. Dental care benefits	19,676		133,800	6.8	5,423,000	276
4. Dental care expenses						
5. Delivery expenses	19,958		-	-	9,619,000	482
6. Nursing allowance	22,236		-	-	5,035,000	227
7. Funeral expenses	3,043		-	-	2,828,000	930

SOCIAL INSURANCE STATISTICS
Benefits Granted Under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948-49, by Month */

NOVEMBER 1948 a/

		Cases <u>b/</u>	Total	Days <u>c/</u>	Per Case	Total	Amount	Per Case <u>c/</u>
A. To Primary Insured								
1.	Medical care benefits <u>d/</u>	502,666	3,100,337	6.2		166,068,000	331	
2.	Nursing care benefits <u>f/</u>							
3.	Dental care benefits <u>e/</u>	71,840	383,054	5.4		36,240,000	505	
4.	Medical care expenses <u>g/</u>	11,715	266,229	22.8		18,470,000	1,575	
5.	Dental care expenses <u>h/</u>							
6.	Sickness and injury allowance <u>i/</u>	39,230	740,250	18.9		63,384,000	1,615	
7.	Maternity allowance <u>j/</u>	988	33,571	33.9		2,055,000	2,080	
8.	Delivery expenses <u>k/</u>	1,260				1,591,000	1,263	
9.	Nursing allowance <u>l/</u>	525				132,000	252	
10.	Funeral expenses <u>m/</u>	1,845				5,634,000	3,060	
11.	Other benefits <u>n/</u>	66,291				23,612,439	357	

B. To Dependents of Insured								
1.	Medical care benefits <u>d/</u>	280,376	1,953,807	7.0		53,972,000	192	
2.	Medical care expenses <u>e/</u>							
3.	Dental care benefits <u>f/</u>	19,389	106,470	5.5		5,981,000	308	
4.	Dental care expenses <u>g/</u>							
5.	Delivery expenses <u>k/</u>	20,662				10,139,000	492	
6.	Nursing allowance <u>l/</u>	12,184				4,580,000	377	
7.	Funeral expenses <u>m/</u>	3,903				3,879,000	995	

SOCIAL INSURANCE STATISTICS
Benefits Granted Under Society-managed Health Insurance (Kumiai Kansho Kenko Hoken), Fiscal Year 1948-49, by Month */

DECEMBER 1948 a/

		Cases b/	Total	Days c/	Per Case	Total	Amount	Per Case g/
A. To Primary Insured								
1.	Medical care benefits d/) p/	664,918	4,502,005	6.8		272,211,000	411	
2.	Nursing care benefits e/) f/) p/	82,446	440,798	5.4		49,921,000	606	
3.	Dental care benefits e/) p/	16,710	372,065	22.3		29,063,000	1,740	
4.	Medical care expenses h/) p/							
5.	Dental care expenses h/) p/							
6.	Sickness and injury allowance i/	44,477	577,956	12.9		75,662,000	1,700	
7.	Maternity allowance j/	1,330	51,197	38.5		2,628,000	1,980	
8.	Delivery expenses k/	1,153	-	-		1,696,000	1,470	
9.	Nursing allowance l/	868	-	-		505,000	584	
10.	Funeral expenses m/	1,867	-	-		4,605,000	2,470	
11.	Other benefits n/	30,880	-	-		13,708,520	444	
B. To Dependents of Insured								
1.	Medical care benefits d/) p/	392,345	2,706,250	6.9		86,456,000	220	
2.	Medical care expenses e/) p/							
3.	Dental care benefits e/) p/	23,580	166,090	7.1		9,667,000	412	
4.	Dental care expenses h/) p/							
5.	Delivery expenses k/	25,758	-	-		12,733,000	496	
6.	Nursing allowance l/	34,300	-	-		12,321,000	360	
7.	Funeral expenses m/	4,195	-	-		4,165,000	994	

FOOTNOTES:

- */ Source: Insurance Bureau, Ministry of Welfare, Data based on reports from an average of 70 Health Insurance Societies representing approximately 12 per cent of the number of insured and a fair cross-section of the industries covered and of the size distribution among the societies.
- a/ The benefit provisions summarized below are as of 1 August 1948, pursuant to a revision in the law which became effective on that date. These are minimum standards. Societies may, and often do, grant more liberal benefits.
- b/ The number of cases is not identical with the number of patients. Renewed incidence of illness in the same person, if occurring in the same month, is counted as two cases. Even in pregnancy cases, one pregnancy may give rise to more than one case of maternity allowance if the woman interrupts her maternity leave, goes back to work, and later resumes her maternity leave.
- c/ In Japanese medical practice "a day of service" may be any one of the following: (1) an initial visit to a physician; (2) subsequent visits to a physician, provided some treatment is given or drug supplied to the patient (3) a day for which a drug has been provided even if the patient did not visit the physician again; (4) a visit to any additional physician even on the same day; (5) a day in the hospital.
- d/ Medical and hospital care available free of charge to the primary insured and at half-price to his dependents for as long as two years if necessary.
- e/ Available on the same terms as d/.
- f/ The services of a nurse, when needed are available on the same terms as d/ and e/. In this table nursing benefits are not shown separately since they are being reported by the societies as part of medical care benefits and expenses granted.
- g/ Whenever appropriate medical or hospital care was not readily available from insurance doctors or other insurance medical personnel or hospital, insured patients who obtained care elsewhere receive a refund of their expenses at insurance rates amounting to the full fee for the primary insured and 50 percent for his dependents. Actually the refund may amount to less inasmuch as general medical treatment fees are often above those set for insurance treatment. The figures shown include nursing care expenses paid by way of reimbursement.
- h/ Cash reimbursement on the same conditions and at the same rates as g/.
- i/ Paid to insured (not dependents) temporarily disabled for work after a three day waiting period and for not more than six months, except in cases of tuberculosis in which the period is extended to 18 months. The rate of compensation is 60 per cent of the taxable daily wage or 40 percent when hospitalization is provided and the insured has no dependents.
- j/ Paid to insured women (not dependents) for a period of 42 days before and 42 days after delivery or as long a part thereof as they are absent from work; the rates are the same as under i/.
- k/ A lump sum grant payable to the insured mother as half the rate of her monthly wage but not less than ¥1,000. If hospitalization is provided, the amount is reduced by one-half. Dependents receive a partial refund of midwives' fees at a flat rate of ¥500 which is paid under the same heading.
- l/ Paid to the mother for six months after delivery at the rate of ¥100 per month, for both insured women and dependents.

- m/ Paid to the person arranging for the funeral of the deceased. It is paid at the rate of one month's pay but not less than ¥2,000. For the funeral of dependents, a lump sum of ¥1,000 is paid.
- n/ In addition to transportation expenses to and from the hospital (full reimbursement thereof to primary insured, reimbursement of 50 percent for dependents), these benefits include a variety of services and cash grants to primary insured and dependents provided by several Health Insurance Societies over and above those stipulated by law. Since it is a catch-all category, the number of "days" would not be significant.
- o/ The per-case amounts of cash benefits are not necessarily identical with the standard set in the law. This is due to the fact that the figures chosen here are those of benefits actually paid out and may comprise several installments of a recurring benefit.
- p/ Breakdown not available.

MONTHLY SUMMARY OF VITAL STATISTICS IN JAPAN:
FEBRUARY, 1949

The attached tables 1 and 2 summarize the vital events of Japan, total "shi" (cities having 30,000 or more population), total "gun" (areas having less than 30,000 population) and each prefecture for the month of February, 1949. Rates for live births, deaths (all ages), marriages and divorces are the number of events per 1,000 population estimated as of 1 July 1948 and are on an annual basis. Rates for infant deaths and stillbirths are the number of events per 1,000 live births in February.

Live Births: Births followed the usual seasonal pattern to decline sharply from the January peak. There were 244,506 births in February compared with 326,166 last month. The birth rate (per 1,000 population) decreased 17 percent from 48.0 last month to 39.8 currently. The current birth rate was 3 percent less than the figure (41.0) for February 1948 and 6 percent higher than the median February rate (37.4) for the 7 year period 1935-1941.

The birth rate for all "shi" combined (33.3) was 6 percent less than for all "gun" (40.7). Prefectural rates ranged from 32.8 in Nara to 48.8 in Hokkaido. Thirty-two prefectures had rates within plus or minus 10 percent of the national average. Eight were higher and 6 were lower.

Deaths (all ages): Deaths totalled 77,763 in February compared with 86,814 in January. The death rate (12.7) per 1,000 population this month was about the same as previously (12.8). It was 10 percent less than the rate (14.1) in the corresponding month of last year and approximately 35 percent less than the median February rate (19.7) for the 7 year period 1935-1941.

The death rate for all "shi" combined (12.0) continued to be lower than for all "gun" (13.1). Rates among the prefectures ranged from 11.0 in Tokyo and Kanagawa to 15.6 in Oita. Thirty-six prefectural rates were within plus or minus 10 percent of the national figure. Seven prefectures (Oita, Shimane, Iwate, Fukui, Ishikawa, Kochi and Saga) had rates more than 10 percent greater than the all Japan rate. Only 3 prefectures (Kanagawa, Tokyo and Osaka) had rates more than 10 percent below the average.

The ten leading causes of death this month are shown in table 3. Seventy percent of all deaths were due to these ten causes. There were decreases from the January levels in the rates for 7 of these. The largest decreases were in congenital debility (9 percent) and diarrhea, enteritis and ulceration of the intestines (7 percent). The other 5 decreases amounted to less than 3 percent each. An increase of 9 percent over last month's rate was recorded for bronchitis and the rates for tuberculosis (all forms) and pneumonia (all forms) increased very slightly (less than 1 percent). Current rates were lower than in February last year for 8 of these causes. The death rate for cancer and other malignant tumours was 9 percent greater this month than in the corresponding period of 1948. Diseases of the heart remained about the same.

Infant Deaths: Infant deaths numbered 17,277 in February compared with 19,706 in the previous month. The infant death rate per 1,000 live births increased 17 percent from 60.4 to 70.7. This increase was due in part to the large decrease births. The current rate was 6 percent less than the rate (75.4) in the corresponding month of 1948 and nearly 40 percent below the median February rate (116.6) for the 5 year period 1938-1942.

The rate for all "shi" combined (63.1) was 15 percent less than for all "gun" (74.4). Prefectural rates ranged from 55.2 in Kyoto to 93.7 in Toyama. Less than half (18) of the prefectural rates were within plus or minus 10 percent of the national average. Seventeen were more than 10 percent higher and 11 were more than 10 percent below it. Two prefectures (Toyama and Mie) had rates in excess of the national rate by more than 30 percent.

Deaths and death rates for the ten leading causes of infant deaths are shown in Table 4. Deaths from the 10 leading causes numbered 14,684. These causes accounted for 85 percent of all infant deaths. All increased from the last month level. Compared with February last year, current rates were higher for 4 causes and lower for the other 6.

Stillbirths: There were 14,195 stillbirths in February with a rate (per 1,000 live births) of 58.1. This was an increase of 27 percent over the January rate of 45.6. As in the case of infant deaths, the large increase is due partly to the large decrease in the number of registered births. The current rate was 24 percent greater than the February 1948 rate and the median February rate for the 7 year period 1935 - 1941, both of which were 46.7.

The stillbirth rate for all "shi" combined (72.4) was 42 percent higher than the rate (50.9) for all "gun". Prefectural rates ranged from 45.6 in Hokkaido to 76.0 in Nagano. There were 29 prefectural rates within plus or minus ten percent of the national figure. Eight were higher and 9 were lower. The highest rates (more than 20 percent above the all Japan rate) were in Nagano, Okayama and Gamma Prefectures.

Marriages: The increase in marriages this month followed the usual pattern for February in past years. There were 92,232 marriages this month compared with 82,805 in the previous month. The rate (per 1,000 population) increased 23 percent from 12.2 to 15.0. There was little change from the February 1948 rate (14.9); however, the current rate was 55 percent greater than the median February rate (9.7) for the 7 year period 1932 - 1938.

The marriage rate for all "shi" combined (13.3) was 16 percent less than for all "gun" (15.9). Rates among the prefectures ranged from 11.5 in Tokyo to 18.3 in Tokushima. Thirty-one prefectures had rates within plus or minus 10 percent of the national rate. Twelve were higher and 3 were lower. Only one prefecture (Tokushima) had a rate in excess of the national average by more than 20 percent. The prefectures with the 3 low rates were Tokyo (11.5), Kanagawa (12.8) and Chiba (13.4).

Divorces: There were 7,113 divorces in February compared with 6,302 in January. The current rate (per 1,000 population) 1.2, was an increase of 33 percent over last month's rate of 0.9. In February 1948 the rate was 1.0 and the median February rate for the 7 year period 1932-1938 was 0.8.

The current divorce rate for all "shi" combined was 1.2 compared with 1.1 for all "gun". Prefectural rates ranged from 0.8 in Chiba, Ibaraki and Saitama to 1.7 in Aomori. Nine prefectures had rates the same as the national rate (1.2), 20 were lower and 17 higher.

TABLE 1.-LIVE BIRTHS, DEATHS, INFANT DEATHS: STILLBIRTHS, MARRIAGES AND
DIVORCES BY PREFECTURE: JAPAN, FEBRUARY 1949

	BIRTH	DEATH	*INFANT DEATH	STILL BIRTH	MARRIAGE	DIVORCE
All Japan	244,506	77,763	17,277	14,195	92,232	7,113
Total All "Shi"	81,195	25,359	5,120	5,875	28,245	2,644
Total All "Gun"	163,311	52,404	12,157	8,320	63,987	4,469
AICHI	9,544	2,961	758	513	3,582	228
AKITA	4,598	1,375	353	260	1,679	130
AOMORI	4,273	1,211	349	199	1,558	154
CHIBA	5,894	2,182	504	321	2,189	139
EFUME	4,783	1,546	401	240	1,876	180
FUKUI	2,426	812	184	125	773	83
FUKUOKA	11,233	3,237	736	586	3,957	360
FUKUSHIMA	6,292	1,885	428	393	2,572	178
GIFU	4,619	1,542	395	250	1,883	108
GUMMA	4,776	1,558	365	351	1,906	150
HIROSHIMA	5,665	1,830	316	318	2,520	207
HOKKAIDO	15,005	4,017	1,007	684	4,420	364
HYOGO	9,359	2,765	565	597	3,670	267
IBARAKI	5,874	2,146	505	374	2,214	128
ISHIKAWA	3,262	1,048	253	185	1,069	109
IWATE	4,672	1,443	380	255	1,619	125
KAGAWA	2,903	972	243	197	1,215	106
KAGOSHIMA	5,379	1,719	303	330	2,143	153
KANAGAWA	6,376	1,955	386	393	2,271	160
KOCHI	2,328	951	158	119	1,092	102
KUMAMOTO	5,649	1,674	322	321	2,284	191
KYOTO	4,961	1,583	274	300	1,858	127
MIE	3,931	1,536	365	225	1,747	119
MIYAGI	5,269	1,534	333	331	1,836	111
MIYAZAKI	3,477	1,062	231	209	1,319	98
NAGANO	5,581	1,921	330	424	2,155	146
NAGASAKI	5,522	1,603	351	288	1,865	175
NARA	1,952	732	153	106	991	66
NIIGATA	7,680	2,337	487	483	2,514	232
OITA	4,097	1,482	329	267	1,604	132
OKAYAMA	4,840	1,677	382	342	1,992	160
OSAKA	10,245	3,041	676	631	3,959	314
SAGA	3,154	1,029	261	156	1,235	89
SAITAMA	6,315	2,094	498	375	2,316	134
SHIGA	2,472	871	174	132	1,075	65
SHIMANE	2,758	1,013	196	192	1,087	95
SHIZUOKA	7,167	2,107	513	420	2,920	182
TOCHIGI	4,784	1,599	393	258	1,948	111
TOKUSHIMA	2,793	928	202	168	1,216	77
TOKYO	14,374	4,549	833	802	4,769	475
TOTTORI	1,704	613	119	116	810	63
TOYAMA	3,190	985	299	148	1,087	111
WAKAYAMA	2,640	903	160	155	1,258	93
YAMAGATA	3,797	1,432	337	246	1,530	117
YAMAGUCHI	4,575	1,555	308	264	1,695	142
YAMANASHI	2,318	748	162	146	954	57

* Deaths under 1 year of age..

Data refer to vital events of Japanese Nationals in Japan Proper.

Source: Monthly Vital Statistics Schedule Report, Ministry of Welfare

TABLE 2. - 1/LIVE BIRTH, DEATH, INFANT DEATH, STILLBIRTH, MARRIAGE AND
DIVORCE RATES BY PREFECTURE: JAPAN, FEBRUARY 1949

	BIRTH	DEATH	INFANT DEATH	STILLBIRTH	MARRIAGE	DIVORCE
All Japan	39.8	12.7	70.7	58.1	15.0	1.2
Total All "Shi"	38.3	12.0	63.1	72.4	13.3	1.2
Total All "Gun"	40.7	13.1	74.4	50.9	15.9	1.1
AICHI	38.7	12.0	79.4	53.8	14.5	0.9
AKITA	46.8	14.0	76.8	56.5	17.1	1.3
AOMORI	45.9	13.0	81.7	46.6	16.7	1.7
CHIBA	36.0	13.3	85.5	54.5	13.4	0.8
EHIME	42.2	13.6	83.8	50.2	16.6	1.6
FUKUI	43.3	14.5	75.8	51.5	13.8	1.5
FUKUOKA	44.3	12.8	65.5	52.2	15.6	1.4
FUKUSHIMA	40.6	12.2	68.0	62.5	16.6	1.1
GIFU	39.6	13.2	85.5	54.1	16.2	0.9
GUMMA	38.8	12.7	76.4	73.5	15.5	1.2
HIROSHIMA	36.2	11.7	55.8	56.1	16.1	1.3
HOKKAIDO	48.8	13.1	67.1	45.6	14.4	1.2
HYOGO	38.8	11.5	60.4	63.8	15.2	1.1
IBARAKI	37.6	13.7	86.0	63.7	14.2	0.8
ISHIKAWA	45.3	14.5	77.6	56.7	14.8	1.5
IWATE	47.2	14.6	81.3	54.6	16.4	1.3
KAGAWA	40.6	13.6	83.7	67.9	17.0	1.5
KAGOSHIMA	39.8	12.7	56.3	61.3	15.9	1.1
KANAGAWA	36.0	11.0	60.5	61.6	12.8	0.9
KOCHI	35.1	14.4	67.9	51.1	16.5	1.5
KUMAMOTO	41.3	12.3	57.0	56.8	16.7	1.4
KYOTO	36.3	11.6	55.2	60.5	13.6	0.9
MIE	35.4	12.8	92.9	57.2	15.7	1.1
MIYAGI	43.2	12.6	63.2	62.8	15.0	0.9
MIYAZAKI	43.2	13.2	66.4	60.1	16.4	1.2
NAGANO	35.1	12.1	59.1	76.0	13.5	0.9
NAGASAKI	46.1	13.4	63.6	52.2	15.6	1.5
NARA	32.8	12.3	78.4	54.3	16.7	1.1
NIIGATA	41.2	12.5	63.4	62.9	13.5	1.2
OITA	43.0	15.6	80.3	65.2	16.8	1.4
OKAYAMA	38.3	13.3	78.9	70.7	15.8	1.3
OSAKA	38.1	11.3	66.0	61.6	14.7	1.2
SAGA	44.3	14.4	82.8	49.5	17.3	1.2
SAITAMA	38.7	12.8	78.9	59.4	14.2	0.8
SHIGA	37.0	13.0	70.4	53.4	16.1	1.0
SHIMANE	39.9	14.7	71.1	69.6	15.7	1.4
SHIZUOKA	38.9	11.4	71.6	58.6	15.9	1.0
TOCHIGI	40.1	13.4	82.1	53.9	16.3	0.9
TOKUSHIMA	42.0	14.0	72.3	60.2	18.3	1.2
TOKYO	34.7	11.0	58.0	55.8	11.5	1.1
TOTTORI	37.6	13.5	69.8	68.1	17.9	1.4
TOYAMA	41.8	12.9	93.7	46.4	14.2	1.5
WAKAYAMA	35.2	12.0	60.6	58.7	16.8	1.2
YAMAGATA	36.9	13.9	88.8	64.8	14.9	1.1
YAMAGUCHI	39.7	13.5	67.3	57.7	14.7	1.2
YAMANASHI	37.2	12.0	69.9	63.0	15.3	0.9

1/ Birth, Death, Marriage and Divorce rates are per 1,000 population estimated as of 1 July 1948 and are worked on an annual basis. Infant death and stillbirth rates are per 1,000 live births in the corresponding period.

Data refer to vital events of Japanese nationals in Japan proper.

Sources: Rates were computed by Public Health and Welfare Section, GHQ, SCAP.
Sources of original data: Monthly Vital Statistics Schedule Report, Ministry of Welfare.

TABLE 3. - THE TEN LEADING CAUSES OF DEATH:
JAPAN, FEBRUARY 1949

List No.	Cause of Death	February 1949		Jan. 1949	Feb. 1948
		Number	Rate	Rate	Rate
	Total of ten leading causes	54112			
13-22	Tuberculosis (all forms)	10106	164.7	163.9	173.4
83	Intracranial lesions of vascular origin	8446	137.7	141.0	148.8
107-109	Pneumonia (all forms)	6816	111.1	110.8	120.7
162	Senility	5893	96.0	97.7	113.8
90- 95	Diseases of the heart	4572	74.5	75.2	74.4
45- 55	Cancer and other malignant tumors	4230	69.1	69.8	63.3
119-120	Diarrhea, enteritis and ulceration of intestines (all ages)	4046	65.9	71.0	86.4
158	Congenital debility	4024	65.6	71.9	81.6
106	Bronchitis	3060	49.9	45.8	55.3
130-132	Nephritis (all forms)	2910	47.4	48.1	54.4

Rates are per 100,000 population, estimated as of 1 July 1948.

TABLE 4. - THE TEN LEADING CAUSES OF INFANT DEATHS:
JAPAN, FEBRUARY 1949

List No.	Cause of Death	February 1949		Jan. 1949	Feb. 1948
		Number	Rate	Rate	Rate
	Total of ten leading causes	14684			
158	Congenital debility	4024	16.5	15.0	19.9
107-109	Pneumonia (all forms)	3772	15.4	12.9	13.3
119	Diarrhea, enteritis and ulceration of intestines	1828	7.5	6.9	8.8
106	Bronchitis	1342	5.5	4.2	5.3
159	Premature Birth	1272	5.2	4.5	5.6
161	Other diseases peculiar to the first year of life	1029	4.2	3.6	5.0
157	Congenital malformations	483	2.0	1.6	1.6
68	Berberi	394	1.6	1.3	2.0
9	Whooping cough	291	1.2	0.9	0.7
199-200	Sudden death, ill-defined and unknown causes	249	1.0	0.8	1.3

Rates are per 1,000 live births in the corresponding period.

TABLE 3 AND TABLE 4:

Sources: Rates were computed by Public Health and Welfare Section, GHQ, SCAP.

Source of original data: Monthly Vital Statistics Schedule Report, Ministry of Welfare.

DIGEST OF WEEKLY REPORT OF COMMUNICABLE DISEASE IN
JAPAN FOR THE WEEK ENDED 23 APRIL 1949

During the seventeenth week ended 23 April 1949 there were reported 21,762 cases of communicable disease compared with 20,726 cases in the preceding week. Reports were received from all prefectures in both weeks. Some corrections were received for last week, and comparisons in this digest are based upon corrected figures.

The number of diphtheria cases this week (323) was 6 percent higher than last week (304). There were 29 deaths compared with 43 previously. Current cases were less than those (337) in the same week of last year and more than half of the corresponding figure (607) for 1947. The number of cases increased over last week in approximately half (24) of the prefectures, decreased in 16, and did not change in 5. The one remaining prefecture (Tottori) had no cases in either week. The current and cumulative case rates for all Japan were 21.1 and 24.1 respectively. The corresponding death rates were 1.9 and 2.5.

There were 66 cases of dysentery this week compared with 58 in the preceding week. The number of deaths (11) remained the same. Current cases were approximately 30 percent below the number (93) reported in the corresponding weeks of both 1948 and 1947. Twenty prefectures reported more cases this week than last week, 13 had fewer, and 4 did not change. The remaining 9 prefectures had no cases in either week. There were 13 cases currently in Tokyo-to, from 1 to 5 cases in each of 29 additional prefectures, and no cases in the other 16. The current and cumulative case rates were 4.3 and 2.9 respectively. The corresponding death rates were both 0.7.

Typhoid fever cases continued at approximately the same level for the seventh consecutive week. They numbered 69 currently compared with 65 last week. Deaths (7) did not change. Cases this week were 58 percent of those (120) in the same week of 1948 and only a third of the corresponding 1947 total (208). There were increases over last week in 18 prefectures and decreases in 17. In 3 prefectures the number remained the same as previously, and in the other 8 prefectures there were no cases in either week. Current cases were distributed among 30 prefectures, Tokyo-to reporting 15, and the remaining 29 prefectures from 1 to 6 cases each. The current and cumulative case rates were 4.5 and 5.5 respectively. The corresponding death rates were 0.5 and 0.7.

There were 30 cases of paratyphoid fever and one death this week compared with 19 cases and 2 deaths last week. Cases in the present week were 40 percent less than in the same week of last year (50) and approximately 60 percent less than the figure (74) for the corresponding 1947 period. Tokyo-to had 11 cases this week, 16 additional prefectures had 1 or 2 cases each, and the remaining 29 prefectures reported that they had no cases. The current and cumulative case rates were both 2.0, and the corresponding death rates were both 0.1.

No smallpox cases were reported this week whereas last week there were 5 cases. There was one death compared with no deaths in the preceding two weeks. In the seventeenth week of 1948 there was one case recorded, and in the same period of 1947 there were 17 cases. The one current death occurred in Fukuoka Prefecture. The cumulative case rate for all Japan was 0.1. The current and cumulative death rates were 0.1 and less than 0.1 respectively.

There were 2 cases of typhus fever and 1 death in the present week compared with 6 cases and no deaths in the last reporting period. In the seventeenth weeks of 1948 and 1947 cases numbered 16 and 23 respectively. The current cases were reported by Kanagawa and Osaka Prefecture, and the one death was in Miyagi Prefecture. The current and cumulative case rates for all Japan were 0.1 and 0.3 respectively. The corresponding death rates were 0.1 and less than 0.1.

Malaria cases numbered 41 this week compared with 49 in the preceding period. There were no current deaths whereas last week there was one. This week's cases were less than half of those (84) in the same week of last year and 28 percent of the figure (144) for the corresponding period of 1947. Fifteen prefectures reported fewer cases this week than in the previous week, 6 had more, and in 3 the numbers

remained the same. Approximately half (22) of the prefectures had no cases in either week. Shiga Prefecture reported 24 cases this week and thus accounted for nearly 60 percent of the total number. The other 17 cases were distributed among 11 additional prefectures having from 1 to 4 cases each. The current and cumulative case rates for all Japan were 2.7 and 1.7 respectively. The cumulative death rate was less than 0.1.

No Japanese "B" encephalitis cases or deaths have been reported since early March. There were no cases in the seventeenth weeks of 1948 and 1947. The cumulative case and death rates as of 23 April 1949 were both less than 0.1.

Scarlet fever cases increased 27 percent, from 82 to 104. Deaths numbered 2 currently whereas there were none in the 2 previous weeks. Present cases were 58 percent above those (66) in the corresponding period of 1948 and 82 percent greater than the 1947 figure (57) for the same week. Cases increased over last week in 19 prefectures, decreased in 10 and did not change in 2. Fifteen additional prefectures had no cases in either week. Current cases were distributed among 26 prefectures. Approximately a third of all cases were reported by Tokyo-to (22) and Hokkaido (13), and the other 24 prefectures had from 1 to 8 cases each. The current and cumulative case rates were 6.8 and 5.8 respectively. The corresponding death rates were both 0.1.

The number of epidemic meningitis cases (36) this week was less than in the preceding week (41). There were 12 deaths compared with 11 last week. Current cases were 68 percent of those (53) in the same week of last year and less than a third of the figure (119) for the corresponding 1947 period. There were decreases from last week in 11 prefectures, increases in 9, and no change in 3. Half (23) of the prefectures had no cases in either week. All of the cases this week were reported by 17 prefectures having from 1 to 6 cases each. The current and cumulative case rates for all Japan were 2.3 and 2.0 respectively. The corresponding death rates were 0.8 and 0.5.

Measles cases this week (5,796) were 5 percent higher than last week (5,501). They were nearly three and a half times the number (1,686) reported in the same week of last year but were 11 percent less than those (6,492) in the corresponding 1947 period. Cases decreased from last week in 24 prefectures and increased in 22. The largest numeric increases were in Tokyo-to, which had 197 more cases this week than previously, and in Osaka, Toyama, and Shimane Prefectures where cases increased by 102, 95, and 94 respectively. Oita and Fukuoka Prefectures had large numeric decreases of 125 and 101 cases respectively. Approximately a third of all the cases this week occurred in 4 prefectures - Tokyo-to (654), Fukuoka (560), Osaka (428), and Kyoto (334). An additional 38 percent was accounted for by 11 prefectures where cases ranged from 156 to 291. The current and cumulative case rates were 377.9 and 206.0 respectively.

There were 6 percent more whooping cough cases this week (1,574) than there were in the preceding week (1,478). Current cases were 73 percent greater than the number (910) recorded for the same week of 1948 but were only about a third of the corresponding 1947 total (4,846). Nearly half (22) of the prefectures reported more cases this week than last week, 20 had fewer, and 4 did not change. Approximately a fourth of the current cases occurred in Hokkaido (166), Tokyo (140), and Fukuoka, (108). The current and cumulative case rates for all Japan were 102.6 and 88.0 respectively.

The number of tuberculosis cases reported this week (9,700) was 6 percent higher than that (9,131) in the previous period. It was 10 percent above the 1948 figure (8,852) for the same week and 22 percent greater than the corresponding 1947 number (7,967). The current and cumulative case rates were 632.4 and 509.7 respectively.

Pneumonia remained at approximately the same level, 3,858 cases this week and in the preceding week 3,901 cases. Current cases were slightly higher than in the seventeenth week of last year (3,753) but were 36 percent less than those (5,998) in the corresponding 1947 period. Cases increased over last week in 25 prefectures, decreased in 20, and did not change in 1. The largest numeric changes were decreases of 84 and 55 cases respectively in Kanagawa and Aichi Prefectures. The current and cumulative case rates were 251.5 and 241.0 respectively.

There were 163 cases of influenza this week compared with 86 cases last week, representing an increase of 90 percent. Current cases were 12 percent higher than those (146) in the same period of last year. Cases in Hiroshima and Saitama Prefectures increased since last week by 33 and 26 cases respectively; 4 prefectures (Shiga, Niigata, Ehime and Kumamoto) had increases of from 7 to 14 cases each; and 9 additional prefectures had numeric increases of from 1 to 4 cases each. The largest decreases were 12 and 9 cases respectively in Miyazaki and Miyagi Prefectures and there were decreases of from 1 to 4 cases each in 10 additional prefectures. Nineteen prefectures had no cases in either week. Current cases were distributed among 21 prefectures. Hiroshima (35) and Saitama Prefectures (29) had nearly 40 percent of all cases, and the other 19 prefectures had cases ranging from 1 to 16 each. The current and cumulative case rates were 10.6 and 4.3 respectively.

The current and cumulative numbers of syphilis cases were 4,183 and 66,115 respectively; for gonorrhea, 3,657 and 57,600; and for chancroid, 454 and 8,968. The current totals for syphilis and gonorrhea were both higher than last week when syphilis cases numbered 3,922 and gonorrhea cases 3,579. The number of chancroid cases, however, was less than in the preceding week (497). All current totals were less than in the same week of last year. At that time there were reported 5,277 cases of syphilis, 5,672 cases of gonorrhea, and 955 cases of chancroid. The current and cumulative case rates as of 23 April 1949 were: syphilis, 272.7 and 253.6; gonorrhea, 238.4 and 220.9; and chancroid, 29.6 and 34.4.

SUMMARY REPORT OF CASES AND DEATHS FROM
COMMUNICABLE DISEASES IN JAPAN
WEEK ENDED 23 APRIL 1949

PREFECTURE	DIPHTHERIA				DYSENTERY			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	17	5	439	55	4	1	*44	3
AOMORI	7	-	108	6	1	-	8	-
IWATE	10	-	133	24	1	-	12	2
MIYAGI	16	-	200	16	1	-	30	5
AKITA	11	-	135	11	2	-	23	1
YAMAGATA	5	1	87	12	1	-	23	1
FUKUSHIMA	7	1	100	15	1	-	13	3
IBARAKI	6	-	86	8	1	1	14	14
TOCHIGI	11	2	85	8	4	1	9	7
GUMMA	3	-	85	9	1	-	13	-
SAITAMA	5	1	122	11	1	-	19	9
CHIBA	3	-	111	15	1	-	21	12
TOKYO	26	2	490	63	13	2	*145	33
KANAGAWA	5	-	188	28	1	1	30	7
NIIGATA	14	2	271	26	3	-	19	5
TOYAMA	5	-	112	13	1	-	2	-
ISHIKAWA	5	-	115	12	1	-	3	-
FUKUI	3	1	49	5	1	-	7	1
YAMANASHI	1	-	36	5	-	-	1	1
NAGANO	8	1	141	11	2	-	11	2
GIFU	5	2	73	16	-	-	4	-
SHIZUOKA	8	1	129	17	2	-	18	5
AICHI	10	-	152	13	4	2	33	13
MIE	2	-	109	7	2	-	10	2
SHIGA	3	-	47	2	-	-	3	-
KYOTO	3	-	62	5	5	-	22	7
OSAKA	13	4	138	15	4	-	49	4
HYOGO	2	-	193	21	1	-	17	5
NARA	2	-	44	5	-	-	-	-
WAKAYAMA	3	-	45	-	1	1	4	1
TOTTORI	-	-	32	5	-	-	4	1
SHIMANE	3	-	110	5	-	-	17	1
OKAYAMA	5	-	64	15	2	-	8	3
HIROSHIMA	10	-	152	10	1	1	12	2
YAMAGUCHI	8	-	117	11	-	-	6	2
TOKUSHIMA	2	-	44	3	-	-	2	2
KAGAWA	7	-	58	8	-	-	1	-
EHIME	1	1	75	13	2	1	16	4
KOCHI	2	-	58	1	1	-	6	-
FUKUOKA	14	3	385	36	-	-	14	6
SAGA	5	-	219	14	-	-	11	5
NAGASAKI	8	1	189	18	-	-	11	6
KUMAMOTO	6	-	109	11	-	-	5	1
OITA	12	-	172	17	-	-	9	2
MIYAZAKI	9	1	221	19	-	-	*13	5
KAGOSHIMA	12	-	189	24	-	-	7	2
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TOTAL	323	29	6279	664	66	11	*749	185
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RATE								
Current	21.1	1.9	24.1	2.5	4.3	0.7	2.9	0.7
Previous	19.8	2.8			3.5	0.7		

See footnotes at end of table.

Weekly Report - 23 April 1949
Continued

PREFECTURE	TYPHOID				PARATYPHOID			
	Current		Cumulative		Current		Cumulative	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
HOKKAIDO	-	-	45	8	1	-	7	1
AOMORI	2	1	14	2	-	-	7	-
IWATE	3	-	15	3	-	-	8	1
MIYAGI	1	-	63	8	1	-	34	3
AKITA	-	-	10	3	1	-	1	-
YAMAGATA	-	-	11	3	-	-	5	-
FUKUSHIMA	1	-	20	2	-	-	7	-
IBAFUKI	1	-	10	1	1	-	7	-
TOCHIGI	2	-	13	5	-	-	1	-
GUMMA	-	1	11	3	-	-	4	1
SAITAMA	1	-	41	7	2	-	8	1
CHIBA	-	-	42	8	1	-	14	1
TOKYO	15	1	272	31	11	-	185	2
KANAGAWA	2	-	49	5	1	-	13	1
NIIGATA	2	-	40	1	1	-	11	1
TOYAMA	-	-	13	4	-	-	8	1
ISHIKAWA	-	-	7	2	-	-	10	-
FUKUI	1	-	18	1	1	-	5	-
YAMANASHI	1	1	4	2	-	-	2	1
NAGANO	1	1	21	2	-	-	4	-
GIFU	2	-	50	9	1	-	3	-
SHIZUOKA	1	-	46	6	1	1	47	3
AICHI	1	-	70	5	1	-	17	-
MIE	4	1	62	7	2	-	21	1
SHIGA	-	-	3	-	-	-	5	-
KYOTO	1	-	34	2	-	-	6	-
OSAKA	3	-	55	8	-	-	9	-
HYOGO	6	-	50	5	-	-	2	-
WAKAYAMA	-	-	4	-	2	-	10	-
TOTTORI	-	-	17	1	-	-	2	-
SHIMANE	1	-	19	4	-	-	3	-
OKAYAMA	-	1	10	5	-	-	5	-
HIROSHIMA	4	-	84	6	-	-	15	1
YAMAGUCHI	-	-	3	-	-	-	5	-
TOKUSHIMA	3	-	11	-	-	-	1	-
KAGAWA	2	-	6	-	-	-	3	1
EHIME	1	-	15	-	-	-	-	-
KOCHI	3	-	24	4	1	-	2	1
FUKUOKA	1	-	67	7	1	-	16	-
SAGA	1	-	17	3	-	-	2	-
NAGASAKI	-	-	* 12	2	-	-	3	-
KUMAMOTO	-	-	5	-	-	-	3	-
OITA	1	-	8	-	-	-	2	1
MIYAZAKI	1	-	4	-	-	-	3	-
KAGOSHIMA	-	-	8	1	-	-	-	-
NAPA	-	-	21	6	-	-	2	-
TOTAL	69	7	*1424	182	30	1	528	22
RATE								
Current	4.5	0.5	5.5	0.7	2.0	0.1	2.0	0.1
Previous	4.2	0.5			1.2	0.1		

See footnotes at end of table.